## UNITED STATES OF AMERICA

## DECLARATION AND POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

- (a) My residence, post-office address, and citizenship are as stated below my name.
- (b) I verily believe that I am the original, first, and sole inventor of the subject matter which is claimed, and for which a patent is sought on the invention entitled

## MICROTUBES FOR SURGERY AND DENTISTRY

and the specification of which is attached hereto. (R-212)

- (c) I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims.
- (d) I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby appoint the following agent to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith:

Reginald F. Roberts, Jr. Registration No. 29,340

Address all correspondence and telephone calls to:

Reginald F. Roberts, Jr. P.O. Box 4535

Baton Rouge, LA 70821-4535

Tel. No. (225)343-8500

I hereby declare that all statements made herein of my own knowledge are true, and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, Section 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

At: Baton Rouge, Louisiana		
this 24 day of Sextentian	, 2003	
Signature: Somuel 1. Lawolin		
Full Name: Samuel R. Levatino	<del></del>	
Residence: Baton Rouge, Louisiana		

P.O. Address: 3608 Woodland Ridge Blvd., Baton Rouge, LA 70816

Parish: East Baton Rouge

Citizenship: United States of America